(INDICA:	TE FELO	ONY OR	MISDE	MEANOI	R)	F KUD <i>F</i>		LIOKI
COURT(S):				THIS REPORT COVERS THE PERIOD FROM: TO:				
COURT I.D. NUMBERS:								
PART I - SUPERVISIONS								
	1	2	3	4	5	6	7	8
	Post-sentence Supervision	Shock Probation	"Split Sentence" Supervision	InterState Accepted	IntraState Accepted	Supervision in Lieu of Prosecution	Other	Total Supervisions (Add Lines 1-7)
A. Supervisions Previously Pending								
B. Supervisions Received								
C. Total Supervisions Before You (A & B)								
PART II - INACTIVE AND CLOSI	ED SUPI	ERVISIO	ONS					
D. Discharged (Completed Probation)								
E. Revoked Because of New Offense								
F. Revoked for Technical Violation Only								
G. Absconded and Warrant Active								
H. Intrastate Transferred Out								
I. Interstate Transferred Out								
J. Other								
K. Total (D through J)								

L. Supervisions Pending (C minus K)

## ADULT PROBATION REPORT (continued)

## PART III

1.	How many pre-sentence investigations were completed during the reporting period?						
2.	Of the supervisions reported on Line L, Column 8, how many are classified as:						
	A. High B. Medium D. Administrative	C. Low E. Total (A through D)					
3.	How many other administrative classifications did you have at the end of the reporting period? (These are in addition to the cases reported in question #2 above. Examples: Intrastate and Interstate cases transferred out, cases with an active warrant/absconder, and/or offenders released from probation but open for fees/programs only.)						
	A. Other Administrative	-					
4.	Of the supervisions received this quarter (Line B, Column 8), how many were convicted of a substance abuse offense as defined in the instructions?						
5.	Of the supervisions received this quarter (Line B, Column 8), how many indicated some type of disruption due to substance abuse on the initial risk assessment form?						
6.	Please explain entries in "Other" categories from Parts I and II.						
Duarran	and have	Dhana Namaham					
Prepar	red by:	Phone Number:					
Chief F	Probation Officer's Printed Name	Signature	Date				
Judge's	s Printed Name	Signature	Date				
MAIL	TO:						
	Division of State Court Administr 115 W. Washington Street, Suite I Indianapolis, IN 46204-3466						